

May 9, 2003

The Honorable W.J. Tauzin U.S. House of Representatives 2183 Rayburn House Office Building Washington, DC 20515 The Honorable John D. Dingell U.S. House of Representatives 2328 Rayburn House Office Building Washington, DC 20515

Dear Chairman Tauzin & Ranking Member Dingell:

On behalf of the four million people with Alzheimer's disease and their family caregivers, we are writing to express our views on the pending Medicare prescription drug debate.

Prescription drugs are a critical component of care for people with Alzheimer's disease. Individuals with Alzheimer's use more prescription drugs than the average Medicare beneficiary, and the cost of these drugs is nearly three times higher than that for Medicare beneficiaries without Alzheimer's disease. These costs are in addition to substantial out-of-pocket expenses for personal care and long term care.

People with Alzheimer's disease need drugs not just for treatment of their Alzheimer's, but also for treatment of behavioral symptoms associated with the disease, and for coexisting medical conditions. A recent Johns Hopkins University study found that:

- the mean monthly cost of prescription drugs for persons with Alzheimer's is \$246.46, or \$2958 annually nearly 3 times the annual cost of \$1,099 for all Medicare beneficiaries:
- 88% of people with Alzheimer's take at least one prescription drug <u>a month</u>, compared to all Medicare beneficiaries, 82% of whom fill at least one prescription a year:
- 68% of people with Alzheimer's take at least two prescriptions each month, and 35% take four or more.

This study also found that the cost of drugs is directly related to coexisting medical conditions. Monthly costs ranged from \$227 for those who had no medical conditions other than Alzheimer's, to \$470 for those with 7 co-morbid conditions.

The Alzheimer's Association continues to advocate for a prescription drug benefit that will assure the affordability of and access to needed medications for all beneficiaries. As the Medicare prescription drug benefit debate takes shape, the Alzheimer's Association will support proposals that meet the following principles:

- It must provide universal coverage for beneficiaries in a manner that preserves and strengthens the existing Medicare program. A new prescription drug benefit should not sacrifice protections that Medicare beneficiaries with chronic care needs have now.
- It must assure beneficiaries with Alzheimer's disease access to the full range of drugs they need, with appropriate cost and utilization controls.
- It must offer all beneficiaries a reasonable amount of "first-dollar" coverage to help meet their drug costs, with "stop-loss" protection that limits out-of-pocket expenses for those with the highest needs.
- It must provide sufficient subsidies for low-income beneficiaries to assure that they have access to the benefit.
- It must balance the need to continue the search for new and more effective drug treatments with the need to assure that those treatments are affordable for beneficiaries and the Medicare program.

We understand that you face considerable budgetary and programmatic challenges in crafting a Medicare prescription drug benefit. We appreciate your interest in this issue and look forward to working with you to develop a benefit that will meet the needs of Medicare beneficiaries with Alzheimer's disease. Thank you for allowing us to express our views on this critical issue.

Sincerely,

Stephen McConnell

Vice President, Advocacy & Public Policy